

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS      | ID NO.       | DATE            |
|---------------------------|---------------|--------------|-----------------|
| FEE DETERMINATION         | <i>TM/291</i> |              | <i>6/25/21</i>  |
| O.I.P.E. CLASSIFIER       |               |              |                 |
| FORMALITY REVIEW          | <i>AS</i>     | <i>5C886</i> | <i>08-07-01</i> |
| RESPONSE FORMALITY REVIEW |               | <i>993</i>   | <i>10-30-1</i>  |

INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)..... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

| Claim | Original | Date |
|-------|----------|------|
| 1     |          |      |
| 2     |          |      |
| 3     |          |      |
| 4     |          |      |
| 5     |          |      |
| 6     |          |      |
| 7     |          |      |
| 8     |          |      |
| 9     |          |      |
| 10    |          |      |
| 11    |          |      |
| 12    |          |      |
| 13    |          |      |
| 14    |          |      |
| 15    |          |      |
| 16    |          |      |
| 17    |          |      |
| 18    |          |      |
| 19    |          |      |
| 20    |          |      |
| 21    |          |      |
| 22    |          |      |
| 23    |          |      |
| 24    |          |      |
| 25    |          |      |
| 26    |          |      |
| 27    |          |      |
| 28    |          |      |
| 29    |          |      |
| 30    |          |      |
| 31    |          |      |
| 32    |          |      |
| 33    |          |      |
| 34    |          |      |
| 35    |          |      |
| 36    |          |      |
| 37    |          |      |
| 38    |          |      |
| 39    |          |      |
| 40    |          |      |
| 41    |          |      |
| 42    |          |      |
| 43    |          |      |
| 44    |          |      |
| 45    |          |      |
| 46    |          |      |
| 47    |          |      |
| 48    |          |      |
| 49    |          |      |
| 50    |          |      |
| 51    |          |      |
| 52    |          |      |
| 53    |          |      |
| 54    |          |      |
| 55    |          |      |
| 56    |          |      |
| 57    |          |      |
| 58    |          |      |
| 59    |          |      |
| 60    |          |      |
| 61    |          |      |
| 62    |          |      |
| 63    |          |      |
| 64    |          |      |
| 65    |          |      |
| 66    |          |      |
| 67    |          |      |
| 68    |          |      |
| 69    |          |      |
| 70    |          |      |
| 71    |          |      |
| 72    |          |      |
| 73    |          |      |
| 74    |          |      |
| 75    |          |      |
| 76    |          |      |
| 77    |          |      |
| 78    |          |      |
| 79    |          |      |
| 80    |          |      |
| 81    |          |      |
| 82    |          |      |
| 83    |          |      |
| 84    |          |      |
| 85    |          |      |
| 86    |          |      |
| 87    |          |      |
| 88    |          |      |
| 89    |          |      |
| 90    |          |      |
| 91    |          |      |
| 92    |          |      |
| 93    |          |      |
| 94    |          |      |
| 95    |          |      |
| 96    |          |      |
| 97    |          |      |
| 98    |          |      |
| 99    |          |      |
| 100   |          |      |

| Claim | Original | Date |
|-------|----------|------|
| 1     |          |      |
| 2     |          |      |
| 3     |          |      |
| 4     |          |      |
| 5     |          |      |
| 6     |          |      |
| 7     |          |      |
| 8     |          |      |
| 9     |          |      |
| 10    |          |      |
| 11    |          |      |
| 12    |          |      |
| 13    |          |      |
| 14    |          |      |
| 15    |          |      |
| 16    |          |      |
| 17    |          |      |
| 18    |          |      |
| 19    |          |      |
| 20    |          |      |
| 21    |          |      |
| 22    |          |      |
| 23    |          |      |
| 24    |          |      |
| 25    |          |      |
| 26    |          |      |
| 27    |          |      |
| 28    |          |      |
| 29    |          |      |
| 30    |          |      |
| 31    |          |      |
| 32    |          |      |
| 33    |          |      |
| 34    |          |      |
| 35    |          |      |
| 36    |          |      |
| 37    |          |      |
| 38    |          |      |
| 39    |          |      |
| 40    |          |      |
| 41    |          |      |
| 42    |          |      |
| 43    |          |      |
| 44    |          |      |
| 45    |          |      |
| 46    |          |      |
| 47    |          |      |
| 48    |          |      |
| 49    |          |      |
| 50    |          |      |
| 51    |          |      |
| 52    |          |      |
| 53    |          |      |
| 54    |          |      |
| 55    |          |      |
| 56    |          |      |
| 57    |          |      |
| 58    |          |      |
| 59    |          |      |
| 60    |          |      |
| 61    |          |      |
| 62    |          |      |
| 63    |          |      |
| 64    |          |      |
| 65    |          |      |
| 66    |          |      |
| 67    |          |      |
| 68    |          |      |
| 69    |          |      |
| 70    |          |      |
| 71    |          |      |
| 72    |          |      |
| 73    |          |      |
| 74    |          |      |
| 75    |          |      |
| 76    |          |      |
| 77    |          |      |
| 78    |          |      |
| 79    |          |      |
| 80    |          |      |
| 81    |          |      |
| 82    |          |      |
| 83    |          |      |
| 84    |          |      |
| 85    |          |      |
| 86    |          |      |
| 87    |          |      |
| 88    |          |      |
| 89    |          |      |
| 90    |          |      |
| 91    |          |      |
| 92    |          |      |
| 93    |          |      |
| 94    |          |      |
| 95    |          |      |
| 96    |          |      |
| 97    |          |      |
| 98    |          |      |
| 99    |          |      |
| 100   |          |      |

| Claim | Original | Date |
|-------|----------|------|
| 1     |          |      |
| 2     |          |      |
| 3     |          |      |
| 4     |          |      |
| 5     |          |      |
| 6     |          |      |
| 7     |          |      |
| 8     |          |      |
| 9     |          |      |
| 10    |          |      |
| 11    |          |      |
| 12    |          |      |
| 13    |          |      |
| 14    |          |      |
| 15    |          |      |
| 16    |          |      |
| 17    |          |      |
| 18    |          |      |
| 19    |          |      |
| 20    |          |      |
| 21    |          |      |
| 22    |          |      |
| 23    |          |      |
| 24    |          |      |
| 25    |          |      |
| 26    |          |      |
| 27    |          |      |
| 28    |          |      |
| 29    |          |      |
| 30    |          |      |
| 31    |          |      |
| 32    |          |      |
| 33    |          |      |
| 34    |          |      |
| 35    |          |      |
| 36    |          |      |
| 37    |          |      |
| 38    |          |      |
| 39    |          |      |
| 40    |          |      |
| 41    |          |      |
| 42    |          |      |
| 43    |          |      |
| 44    |          |      |
| 45    |          |      |
| 46    |          |      |
| 47    |          |      |
| 48    |          |      |
| 49    |          |      |
| 50    |          |      |
| 51    |          |      |
| 52    |          |      |
| 53    |          |      |
| 54    |          |      |
| 55    |          |      |
| 56    |          |      |
| 57    |          |      |
| 58    |          |      |
| 59    |          |      |
| 60    |          |      |
| 61    |          |      |
| 62    |          |      |
| 63    |          |      |
| 64    |          |      |
| 65    |          |      |
| 66    |          |      |
| 67    |          |      |
| 68    |          |      |
| 69    |          |      |
| 70    |          |      |
| 71    |          |      |
| 72    |          |      |
| 73    |          |      |
| 74    |          |      |
| 75    |          |      |
| 76    |          |      |
| 77    |          |      |
| 78    |          |      |
| 79    |          |      |
| 80    |          |      |
| 81    |          |      |
| 82    |          |      |
| 83    |          |      |
| 84    |          |      |
| 85    |          |      |
| 86    |          |      |
| 87    |          |      |
| 88    |          |      |
| 89    |          |      |
| 90    |          |      |
| 91    |          |      |
| 92    |          |      |
| 93    |          |      |
| 94    |          |      |
| 95    |          |      |
| 96    |          |      |
| 97    |          |      |
| 98    |          |      |
| 99    |          |      |
| 100   |          |      |

If more than 150 claims or 10 actions  
staple additional sheet here

(LEFT INSIDE)

315  
410  
6/28  
6/28